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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

*None Ab*  
*None Rb*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 06/01/2004

Foreign Priority claimed. <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> NH	<b>SHEETS DRAWING</b> 16	<b>TOTAL CLAIMS</b> 41	<b>INDEPENDENT CLAIMS</b> 5 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>Ab</i>				

## ADDRESS

26161

## TITLE

High frequency droplet ejection device and method

<b>FILING FEE RECEIVED</b> 1450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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